

JAN 21 2005

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**FACSIMILE TRANSMISSION**

**To:** USPTO

**Fax No:** 703-872-9306

**From:** Thedford I. Hitaffer, Reg. No. 38,490

**Fax:** 419-255-9639

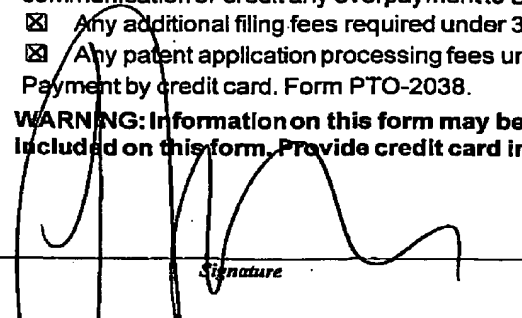
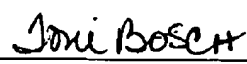
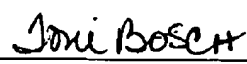
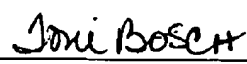
**Comments:** Please see the attached extension of time (in dupl.), amendment & amendment transmittal letter. Thank you for your assistance with this matter.

Total pages including cover page: 14

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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. <b>1-24057</b>									
Applicant(s): <b>MICHAEL KNOFF et al.</b>														
Application No. <b>10/670,494</b>	Filing Date <b>September 24, 2003</b>	Examiner <b>Tony H. Winner</b>	Customer No. <b>04859</b>	Group Art Unit <b>3611</b>	Confirmation No. <b>7992</b>									
Invention: <b>Wheelchair and Wheel Mounting Assembly Therefore</b>														
<b>COMMISSIONER FOR PATENTS:</b>														
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.														
<b>CLAIMS AS AMENDED</b>														
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE									
TOTAL CLAIMS	20 -	20 =	0	x \$50.00	\$0.00									
INDEP. CLAIMS	3 -	3 =	0	x \$200.00	\$0.00									
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00									
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>									
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 13-0005 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>														
 _____ Signature			Dated: <b>January 19, 2005</b>											
<b>Thedford L. Hitaffer, Reg. No. 38,490</b> <b>MacMillan, Sobanski &amp; Todd, LLC</b> <b>One Maritime Plaza, Fourth Floor</b> <b>720 Water Street</b> <b>Toledo, OH 43604</b> <b>Telephone: 419-255-5900</b> <b>Facsimile: 419-255-9639</b>			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</td> </tr> <tr> <td style="text-align: center;">January 19, 2005</td> <td style="text-align: center;">(Date)</td> </tr> <tr> <td colspan="2" style="text-align: center;">             _____            Signature of Person Mailing Correspondence         </td> </tr> <tr> <td colspan="2" style="text-align: center;"> <b>Toni Bosch</b>            _____            Typed or Printed Name of Person Mailing Correspondence         </td> </tr> </table>				I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on		January 19, 2005	(Date)	 _____ Signature of Person Mailing Correspondence		<b>Toni Bosch</b> _____ Typed or Printed Name of Person Mailing Correspondence	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on														
January 19, 2005	(Date)													
 _____ Signature of Person Mailing Correspondence														
<b>Toni Bosch</b> _____ Typed or Printed Name of Person Mailing Correspondence														
cc:														

P11LARGE/REV09

CERTIFICATE OF MAILING BY FIRST CLASS MAILPATENT

I hereby certify that this document is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner For Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on the date set forth below.

Joni Basch  
(signature)  
Date of signature and deposit - January 19, 2005

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JAN 21 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	)	
Michael Knopf et al.	)	Group Art Unit: 3611
	)	
Serial No.: 10/670,494	)	Examiner: T. Winner
	)	
Filed: September 24, 2003	)	Confirmation No.: 7992
	)	
For: Wheelchair and Wheel Mounting	)	Attorney Docket: 1-24057
Assembly Therefore	)	

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

AMENDMENT

Honorable Sir:

Please amend the above-identified application as indicated on the following pages. Please charge Deposit Account 13-0005 for any fees that may be required by the filing of this paper.

Respectfully submitted,

Thedford I. Hilafer  
Reg. No. 38,490

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